## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			51					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			5/ minus 20=		* 2	* 3/		X\$ 9=	219	OR	X\$18=	6	
INDEPENDENT CLAIMS			4 mi	nus 3 =	* [	* /		X43=	43	OR	X86=		
MU	LTIPLE DEPEN	NDENT CLAIM PE	RESENT		<del></del>			+145=	} <i>}</i> -	OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				ı	TOTAL	707	OR	TOTAL		
CLAIMS AS AMENDED - PART II										_	OTHER		
		(Column 1)	(Colum			(Column 3)		SMALL		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	F CL AINA	=		X43=		OR	X86=		
Ш	FIRST PRESE	ENTATION OF MU	JLIPLE DEF	ENDEN	CLAIIVI			+145=		OR	+290=		
	1 14 27 31							TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
_		(Column 1)		(Colun	nn 2)	(Column 3)	-			•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=	_ ·	OR	X\$18=		
AME	Independent	* NTATION OF MU	Minus	***	CL AIM	=		X43=		OR	X86=		
Ш	FINOI FRESE	NIATION OF WIL	LIPLE DEF	ENDENT	CLAIIVI		' [	+145=		OR	+290 <sup>-</sup>		
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)	•	·• - · ·					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE	
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***.		= .		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."											TOTAL		
***	If the "Highest Nui	mber Previously Pa	aid For" IN THIS	S SPACE is	s less thar	n 3, enter "3."	~	DDIT. FEE L		٠, ٠	ADDIT. FEE		
	ne "Hignest Num	nber Previously Paid	J For" (Total or	Inaepenae	int) is the	nignest numbei	r tour	nd in the app	ropriate box	: In coll	umn 1.		